



Lincoln Police Department
James Peschong, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR CHRIS BEUTLER

lincoln.ne.gov

October 17, 2011

Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of Blue Blood Brewing, 500 West South Street Suite 8 requesting a class L liquor license.

This location will be a brew pub which will wholesale the product.

Brian Podwinski, owner has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Brian Podwinski was born in Lincoln, Nebraska. He attended the University of Nebraska graduating in 2004.

Brian Podwinski employment history is as follows:

2007 - 2011	Nebraska Emergency Management	Lincoln, NE.
2000 - 2006	Police Officer, City of Lincoln	Lincoln, NE.

Stockholder information has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.


JIM PESCHONG Chief of Police



A nationally accredited law enforcement agency



**MANAGER APPLICATION
INSERT - FORM 3c**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

Office Use

RECEIVED

OCT 03 2011

NEBRASKA LIQUOR
CONTROL COMMISSION

Corporate manager, including their spouse, are required to adhere to the following requirements

- 1) Must be a citizen of the United States
- 2) Must be a Nebraska resident (Chapter 2 - 006) and must provide proof of voter registration in the State of Nebraska
- 3) Must provide a copy of one of the following: state issued US birth certificate, naturalization paper or US passport
- 4) Must submit their fingerprints (2 cards per person) and fees of \$38 per person, made payable to the Nebraska State Patrol
- 5) Must be 21 years of age or older
- 6) Applicant may be required to take a training course

*Passport
voter reg*

Corporation/LLC information

Name of Corporation/LLC: Blue Blood Brewing Company, Inc.

Premise information

Premise License Number: _____

(if new application leave blank)

Premise Trade Name/DBA: Blue Blood Brewing Company

Premise Street Address: 500 West South Street, Suite 8

City: Lincoln State: NE Zip Code: 68522

Premise Phone Number: 402-540-2075

The individual whose name is listed as a corporate officer or managing member as reported on insert form 3a or 3b must sign their name below

[Handwritten Signature]

CORPORATE OFFICER/MANAGING MEMBER SIGNATURE
(Faxed signatures are acceptable)

Manager's information must be completed below PLEASE PRINT CLEARLY

Gender: ☒ MALE ☐ FEMALE

Last Name: Podwinski First Name: Brian MI: C

Home Address (include PO Box if applicable): 9322 South 28th Street

City: Lincoln County: Lancaster Zip Code: 68516

Home Phone Number: 402-742-0075 Business Phone Number: 402-540-2075

Social Security Number: _____ Drivers License Number & State: NE

Date Of Birth: _____ Place Of Birth: Lincoln, NE

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

☒ YES

☐ NO

Spouse's information

Spouses Last Name: Podwinski First Name: Amanda MI: DE

Social Security Number: _____ Drivers License Number & State: NE

Date Of Birth: _____ Place Of Birth: Wayne, NE

APPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS

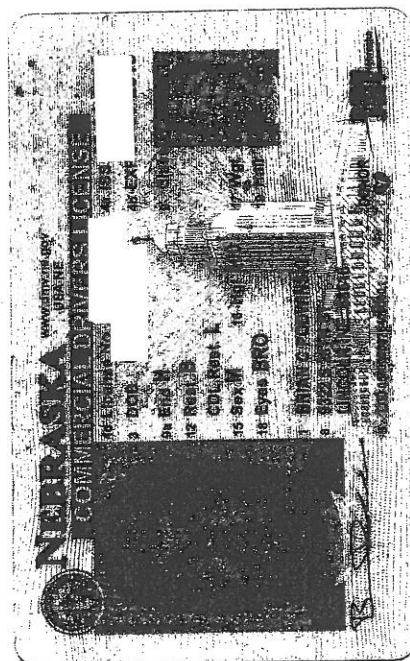
APPLICANT

SPOUSE

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Lincoln, NE	1978	2011	Wakefield	1982	2000
			Lincoln	2000	2011

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CONTROL COMMISSION

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CONTROL COMMISSION



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NEBRASKA LIQUOR
CONTROL COMMISSION



OK

APPLICATION FOR LIQUOR LICENSE
CORPORATION
INSERT - FORM 3a

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

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NEBRASKA LIQUOR
CONTROL COMMISSION

Officers, directors and stockholders holding over 25% shares of stock, including spouses, are required to adhere to the following requirements:

- 1) All officers, directors and stockholders must be listed
- 2) President/CEO and stockholders holding over 25% and their spouse(s) (if applicable) must submit fingerprints (2 cards per person)
- 3) Officers, directors and stockholders holding over 25 % shares of stock and their spouse (if applicable) must sign the signature page of the Application for License form 100 (even if a spousal affidavit has been submitted)

SOS Acct 10146973

Attach copy of Articles of Incorporation (Articles must show barcode receipt by Secretary of States Office)

Name of Registered Agent: Brian Podwinski

Name of Corporation that will hold license as listed on the Articles

Blue Blood Brewing Company, Inc.

Corporation Address: 500 West South Street, Suite 8

City: Lincoln State: NE Zip Code: 68522

Corporation Phone Number: 402-540-2075 Fax Number: _____

Total Number of Corporation Shares Issued: 1000

Name and notarized signature of President/CEO (Information of president must be listed on following page)

Last Name: Podwinski First Name: Brian MI: C

Home Address: 9322 S 28th Street City: Lincoln

State: NE Zip Code: 68516 Home Phone Number: 402-540-2075



Signature of President/CEO

ACKNOWLEDGEMENT

State of Nebraska

County of Lancaster

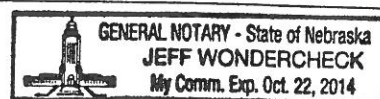
The foregoing instrument was acknowledged before me this

Sept. 7 2011

Date

by _____
name of person acknowledge

Affix Seal



List names of all officers, directors and stockholders including spouses (even if a spousal affidavit has been submitted)

Last Name: Podwinski First Name: Amanda MI: DE

Social Security Number: _____ Date of Birth: _____

Title: Secretary Number of Shares 0

Spouse Full Name (indicate N/A if single): Brian Podwinski

Spouse Social Security Number: _____ Date of Birth: _____

*Signed
prints
passport
voter reg*

Last Name: Podwinski First Name: Brian MI: C

Social Security Number: _____ Date of Birth: _____

Title: President Number of Shares 560

Spouse Full Name (indicate N/A if single): Amanda Podwinski

Spouse Social Security Number: _____ Date of Birth: _____

*Signed
prints
passport
voter reg*

Last Name: Goodwin First Name: Jason MI: D

Social Security Number: _____ Date of Birth: _____

Title: Shareholder Number of Shares 250

Spouse Full Name (indicate N/A if single): NA

Spouse Social Security Number: _____ Date of Birth: _____

*not
required*

Last Name: Wagner First Name: Brock MI: M

Social Security Number: _____ Date of Birth: _____

Title: Shareholder Number of Shares 190

Spouse Full Name (indicate N/A if single): Gretchen C. Wagner

Spouse Social Security Number: _____ Date of Birth: _____

Signed

Signed

List names of all officers, directors and stockholders including spouses (Even if a spousal affidavit has been submitted)

Last Name: Wagner First Name: Gretchen MI: C

Social Security Number: _____ Date of Birth: _____

Title: Board Member Number of Shares 0

Spouse Full Name (indicate N/A if single): Brock M. Wagner

Spouse Social Security Number: _____ Date of Birth: _____

signed

signed

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

